



Linda McCulloch, Superintendent
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501

School District Claim for
State Reimbursement for
Individual and Isolated Transportation

State ☐
District ☐
County ☐

DUE DATES:	First Semester	Second Semester
	February 1 to County Superintendent February 15 to State Superintendent	May 10 to County Superintendent May 24 to State Superintendent
COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION:		

This claim is for the period beginning _____, 20____ and ending _____, 20____.
month day month day

CERTIFICATION:

The information on this form is complete and accurate to the best of my knowledge.

Date		Signature, Chair, Board of Trustees			
County:		District:		District Level:	
32 Missoula		0584 Missoula H S		High School	
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
1	1663	No	ANDERSON, DENNIS	0.75	_____
1	1664	No	MEYER, ALICE	2.00	_____
1	1665	No	RUFF, RANDY & CARRIE	0.25	_____



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Date			Signature, Chair, Board of Trustees		
County: 32 Missoula			District: 0586 Hellgate Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
4	1657	No	BANCALE, SUZANNE	0.25	_____
4	1658	No	BEERS, LEANNE	0.50	_____
4	1659	No	DZOMBA, THOMAS & VALERIE	0.25	_____
4	1660	No	FREEMAN, LORI	2.00	_____
4	1661	No	JONES, CHRISTINE	0.50	_____
4	1662	No	KELLY, KRIS	0.25	_____
4	1666	No	LINDGREN, RELINDA	1.25	_____
4	2360	No	Piedalue, Delsa	0.25	_____
4	2361	No	Wilson, Harold	0.25	_____



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County: 32 Missoula			District: 0588 Lolo Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
7	1667	No	HEATH, SCOTT & TERRI	1.00	_____
7	1668	No	RUTLEDGE, STEPHEN	1.00	_____
7	2003	No	JOHNSON, SCOTT	4.50	_____



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County: 32 Missoula			District: 0589 Potomac Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
11	2222	No	Cheff, Christina	0.00	_____
11	2223	No	Cheff, Crystal	1.13	_____
11	2224	No	Cheff, Mark & Rebekka	0.68	_____
11	2225	No	McDaniel, Neil & Wendy	1.08	_____
11	2226	No	O'Boyle, Bob & Virginia	0.58	_____
11	2227	No	Olson, Suzi	0.50	_____
11	2228	No	Philliber, Bonnie	0.50	_____
11	2229	No	Zander, Kathy	0.33	_____



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Date			Signature, Chair, Board of Trustees		
County: 32 Missoula			District: 0592 DeSmet Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
20	2217	No	Davis, Carrie & Clint	2.50	_____
20	2268	No	Shoen, Sandy & John	7.50	_____
20	2285	No	Shoen, Sandy & John	3.00	_____



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County:			District:		District Level:
32 Missoula			0593 Target Range Elem		Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
23	1061	No	Brown, Elaine	1.13	_____
23	1062	No	Moss, Valerie	1.00	_____
23	1312	No	Kelly, Diann	0.90	_____
23	1313	No	Goss, Molly	1.00	_____
23	1314	No	Just, Linda	1.00	_____
23	1990	No	BROWN, LEE	1.18	_____
23	1991	No	KICKING WOMAN, JONI	0.95	_____



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County: 32 Missoula			District: 0594 Sunset Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
30	1030	No	Garlach, Betsy	0.50	_____
30	1032	No	Tallon, Dennis	1.00	_____
30	2294	No	Leetch, Jim & Wendy	5.25	_____



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District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
32	1031	No	Wills, Jennifer	0.25	_____
32	1669	No	BECKER, VIRGINIA	1.85	_____
32	1670	No	COLLINS, DAVE & MANDI	1.75	_____
32	1671	No	NOVAK, DICK	2.75	_____
32	1672	No	ROSKE, SALLY & JON	4.00	_____
32	2004	No	PROCTOR, DOUGLAS	3.60	_____



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County: 32 Missoula			District: 0599 Frenchtown K-12 Schools		District Level: High School	
District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
40	1674	No	JOHNSON, KELLY		11.63	_____
40	2015	No	GRIFFITH, JESSICA		4.50	_____